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7590

06/10/2004

Applied Biosystems
 Andrew T Karnakis
 500 Old Connecticut Path
 Framingham, MA 01701

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Patricia Jocci	(Depositor's name)
<i>Patricia Jocci</i>	(Signature)
7/29/04	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/889,711	07/18/2001	Willy Vincent Bienvenut	SYP-159	8631

TITLE OF INVENTION: METHOD AND KIT FOR IDENTIFYING OR CHARACTERISING POLYPEPTIDES

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$0	\$1330	09/10/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
NAFF, DAVID M	1651	435-023000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 _____
 2 _____
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

University of Geneva Geneva (CH)

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☐ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

☒ Issue Fee☐ Publication Fee☒ Advance Order - # of Copies 10

4b. Payment of Fee(s):

☐ A check in the amount of the fee(s) is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 501191 (enclose an extra copy of this form).

Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature)

(Date)

Andrew T. Karnakis 29 July 2004

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This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.

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TRANSMIT THIS FORM WITH FEE(S)



Case No. SYP-159L

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of Bienvenut, et al.

) Group Art Unit: 1651

) Examiner: Naff, David M.

Serial No.: 09/889,711

Filed: 7/18/2001

For: **Method and Kit for Identifying
or Characterising Polypeptides**

Confirmation No. 8631

CERTIFICATE OF MAILING	
I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Attention: Mail Stop: ISSUE FEE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on	
7/29/04	(Date of Deposit)
Patricia E. Tocci	Name of Depositing Party
<i>Patricia E. Tocci</i>	Signature

ISSUE FEE TRANSMITTAL

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Alexandria, VA 22313-1550

Sir:

Per the Notice of Allowance mailed 06/10/04, please charge the issue fee of \$1,330.00 and advance order fee for \$30.00 (for a total of \$1,360.00) for the above-referenced case to **Deposit Account No. 501191 (Order No. SYP-159L)**.

The Commissioner is hereby authorized to charge any additional fees required under 37 CFR § 1.16 and 1.17, or credit overpayment to **Deposit Account No. 501191 (Order No. SYP-159L)**.
A duplicate of this sheet is enclosed.

Respectfully submitted,

Date: July 29, 2004

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